

Political Committee  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2010 Judicial Election

Name of Committee Committee to Re-elect VernonAddress 108 Hillside Dr Carthage, MSTelephone 601-267-3109 Fax \_\_\_\_\_Treasurer Jane Shepard Email \_\_\_\_\_☐ Check here if above is different from previous report

## TYPE OF REPORT

- ☐ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory
- ☒ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory
- ☐ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory
- ☐ October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory
- ☐ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory
- ☐ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates
- ☐ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory
- ☐ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

## IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

## REPORTED CONTRIBUTIONS AND DISBURSEMENTS

|                               | Itemized + Non-itemized =            | This Period        | Calendar Year-To-Date |
|-------------------------------|--------------------------------------|--------------------|-----------------------|
| Total amount of contributions | \$ <u>12</u> + \$ <u>2979.68</u>     | \$ <u>2979.68</u>  | \$ <u>21299.68</u>    |
| Total amount of disbursements | \$ <u>1331.72</u> + \$ <u>191.50</u> | \$ <u>1523.22</u>  | \$ <u>6220.39</u>     |
| Total amount of cash on hand  |                                      | \$ <u>15079.29</u> |                       |

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Signature of Director or Treasurer

Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2519.

2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Committee to Re-elect Vernon Cotten Page 1 of 1  
 Reporting period June 1 May 1 through May 31, 2010

## ITEMIZED DISBURSEMENTS

|   |  |  |  |
|---|--|--|--|
| A. Full name<br><u>Cox Insurance Agency</u>                                   |  | Date<br>(Mo., Day, Year)<br><u>5/24/10</u> | Amount of each<br>disbursement this period<br>\$ <u>100.00</u> |
| Mailing Address<br><u>Main St</u>   |  |  |  |
| City, State, Zip Code<br><u>Carthage Ms 39051</u>                             |  | <u>—/—/—</u>                               | \$   |
| Purpose of Disbursement (Optional)<br><u>Office Rental</u>                    |  | Aggregate<br>Year-to-date                  | \$ <u>300.00</u>   |
| B. Full name<br><u>Brian Gamillon</u>   |  | Date<br>(Mo., Day, Year)                   | Amount of each<br>disbursement this period                     |
| Mailing Address<br><u>P.O. Box 129</u>  |  | <u>5/21/10</u>                             | \$ <u>991.72</u>   |
| City, State, Zip Code<br><u>Walnut Grove Ms 39189</u>                         |  | <u>—/—/—</u>                               | \$   |
| Purpose of Disbursement (Optional)<br><u>Website, computer data reimburse</u> |  | Aggregate<br>Year-to-date                  | \$ <u>2301.72</u>  |
| C. Full name<br><u>Ken Roberts</u>  |  | Date<br>(Mo., Day, Year)                   | Amount of each<br>disbursement this period                     |
| Mailing Address   |  | <u>5/10/10</u>                             | \$ <u>240</u>  |
| City, State, Zip Code   |  | <u>—/—/—</u>                               | \$   |
| Purpose of Disbursement (Optional)<br><u>Purchase computer</u>                |  | Aggregate<br>Year-to-date                  | \$   |
| D. Full name  |  | Date<br>(Mo., Day, Year)                   | Amount of each<br>disbursement this period                     |
| Mailing Address   |  | <u>—/—/—</u>                               | \$   |
| City, State, Zip Code   |  | <u>—/—/—</u>                               | \$   |
| Purpose of Disbursement (Optional)  |  | Aggregate<br>Year-to-date                  | \$   |
| E. Full name  |  | Date<br>(Mo., Day, Year)                   | Amount of each<br>disbursement this period                     |
| Mailing Address   |  | <u>—/—/—</u>                               | \$   |
| City, State, Zip Code   |  | <u>—/—/—</u>                               | \$   |
| Purpose of Disbursement (Optional)  |  | Aggregate<br>Year-to-date                  | \$   |
| F. Full name  |  | Date<br>(Mo., Day, Year)                   | Amount of each<br>disbursement this period                     |
| Mailing Address   |  | <u>—/—/—</u>                               | \$   |
| City, State, Zip Code   |  | <u>—/—/—</u>                               | \$   |
| Purpose of Disbursement (Optional)  |  | Aggregate<br>Year-to-date                  | \$   |